| | ACCEPTED FOR PROCESSING - 2018 August 15 12:09 PM - SCPSC - 2018-270-T - Page 1 of 9 |
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| | |

| STATE OF SOUTH CAROLINA (Caption of Case) Example: Application for a Class C Charter Certificate from John Doe dba Doe's Limo Application For a Class C Taxi Cotificate From Jonathan Dick dba Carror Cab | BEFORE THE PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA TRANSPORTATION COVER SHEET DOCKET NUMBER: 20/8 - 270 - T If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you | |
|--|--|--------------|
| (Please type or print) Submitted by: Jonathon Dick Hoa Curan | have filed with the Commission before, a Docket Number was assigned and should be entered above. We Telephone: \$\mathcal{J43} \mathcal{J48} - \mathcal{S62} \mathcal{S}\$ | - 2018 / |
| Address: 939 Anson Court Suffside Beach, SC 29575 | Fax: 843-448-2886 Other: | August 15 12 |
| NOTE: The cover sheet and information contained herein neither replaces required by law. This form is required for use by the Public Service obe filled out completely. | | |
| NATURE OF ACTION | (Check all that apply) | VC. |
| ☐ Application - Class A/A Restricted ☐ Application - Class C Taxi | Request for Name Change on Certificate Request to Amend Scope of Authority | 72 - 70 |
| Application - Class C Charter | Request to Amend Tariff (rate increase, etc.) | 7-910 |
| Application - Class C Charter Bus | Request to Amend Passenger Limit | -0/ |
| Application - Class C Non-Emergency | Request | _ _ T |
| Application - Class C Stretcher Van | Exhibit | 'age |
| Application - Class E Household Goods | Late-Filed Exhibit | 10 |
| Application - Class E Hazardous Waste | Letter | Œ |
| Application | Proposed Order | |
| Request for Extension to Comply with Order | Publisher's Affidavit | |
| Request for Order Granting Authority to Obtain a Certificate of Public Convenience and Necessity to be Rescinded | Reservation Letter RECEIVED Response | |
| Request for Cancellation of Certificate | Return to Petition | |
| Request for Suspension | Other: PSC SC MAIL / DMS | |
| Request for Reinstatement | | |

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA

101 Executive Center Drive, Suite 100 Columbia, South Carolina 29210

Phone: (803) 896-5100

Fax: (803) 896-5199

APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY FOR OPERATION OF MOTOR VEHICLE CARRIER

| | Date: 5 | 8/3/2018 |
|----|--|---|
| C | CLASS C - TAXI | |
| | | |
| | Application is hereby made for a Certificate of Public Convenience and Nece of S.C. Code Ann., § 58-23-10, et seq. (1976), and amendments thereto. | essity, in accordance with the provision |
| ١. | Jonathon Dick dba Cannon Cab | |
| | Name under which business is to be conducted (corporation, partnership, or sole p | proprietorship, with or without trade name. |
| | 939 Anson Court Surfside Beach, SC | 29575 |
| | Street Address of Applicant | |
| | Mailing Address of Applicant (if different from str | reet address) |
| | 843-798-8628 | 843-448-2886 |
| - | Phone | Fax |
| | jondawg6695@gmail.com | |
| - | Email Address | |
| 2. | 2. If the Applicant is an LLC or a corporation, a copy of the Certificate of Ex Secretary of State and the Articles of Incorporation must be attached. (If inc Carolina Secretary of State "Foreign Corporation" Certificate.) | |
| 3. | S. Select Entity Type: (Check one) | |
| | | |
| | Partnership - List names and addresses of all person having an interes | st in the business. |
| | Corporation - List names and addresses of two principal officers. | |
| | • | RECEIVED |
| | | AUG 14 2018 |
| | | |

1 of 8

Applicant is financially able to furnish the services as specified in this application and submits the following statement of assets and liabilities.

Financial Statement

Applicant's assets and liabilities are as follows:

| <u>Assets:</u> | | <u>Liabilities:</u> | | | | |
|--|----------|------------------------------|-----------|--|--|--|
| Value of Real Estate | 0 | Mortgage/Loan on Real Estate | | | | |
| Value of Motor Vehicles | 10,700 | Loans Owed on Motor Vehicles | 2,700 | | | |
| Cash on Hand | 4,500 | Business/Other Loans Owed | | | | |
| Cash in Bank | 4,200 | Other Liabilities or Debts | | | | |
| Value of Other Assets and Equipment | 1500 | Total Liabilities | \$2,700 1 | | | |
| Total Assets | \$20,400 | | | | | |

INSTRUCTIONS:

- 1. "Value of Real Estate" means the actual or estimated market value of any real property/buildings owned by the Company/Business Applying for a Certificate.
- 2. "Mortgage/Loan on Real Estate" means the outstanding balance on any Mortgage, Equity Line or other Loan secured by the Real Estate listed in Item 1.
- 3. "Value of Motor Vehicles" means the actual or fair estimated value of any moving vans, trucks or other vehicles owned by the Company/Business Applying for a Certificate.
- 4. "Loans Owed on Motor Vehicles" means the outstanding balance on any loans or liens on the vehicles listed in Item 3.
- 5. "Cash on Hand" is the total of actual cash held by the Company/Business applying for a Certificate on the day this form is filled out.
- 6. "Business/Other Loans Owed" means the outstanding balance on any small business loan or other unsecured loan made by a person, bank or business to the Business/Company applying for a Certificate.
- 7. "Cash in Bank" means the current balance in checking accounts, savings accounts or the like in the name of the Company/Business applying for a Certificate. Do not include retirement accounts or personal bank account balances.
- 8. "Value of Other Assets and Equipment" should include the actual or estimated value of items such as office equipment (computers/furnishings), moving equipment (hand trucks/blankets/strapping), and trailers.
- 9. "Other Liabilities or Debts" means specific amounts/balances which the Company/Business applying for a Certificate knows that it owes to other persons or companies; for example Franchise Fees. This does NOT include regular bills such as electricity bills, security system costs, insurance, salaries, etc.

PROPOSED RATES AND CHARGES FOR SERVICE

| Proposed Rates and | Charges: | | | |
|----------------------|------------------------|-----------------------|-----------------------|-----------------------|
| \$2.80/mile | | | | |
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| Requested Scope of | f Authority: Chack a | Il counties in which | you are requesting pe | remigaion to occupato |
| You will only be a | llowed to operate in t | those counties checke | ed below. You may r | |
| authority if you int | end to operate in all | counties in South Car | rolina. | - |
| Abbeville | Cherokee | Florence | Lee | Saluda |
| Aiken | Chester | Georgetown | Lexington | Spartanburg |
| Allendale | Chesterfield | Greenville | Marion | Sumter |
| Anderson | Clarendon | Greenwood | Marlboro | Union |
| Bamberg | Colleton | Hampton | McCormick | Williamsburg |
| ☐ Barnwell | Darlington | ⊠ Horry | Newberry | York |
| Beaufort | Dillon | Jasper | Oconee | |
| Berkeley | Dorchester | Kershaw | Orangeburg | Statewide |
| Calhoun | Edgefield | Lancaster | Pickens | |
| Charleston | Fairfield | Laurens | Richland | |
| | | | | |

DESCRIPTION OF EQUIPMENT

You are **not** required to own a vehicle to file an application. However, prior to being issued a certificate by ORS, you will be required to have obtained a vehicle.

Maximum Number of Passengers Vehicle is Equipped to Carry: (The number of passengers a vehicle is equipped to carry is based on the number of <u>seatbelts</u> in the vehicle, including the driver's seatbelt.)

| \boxtimes | 1-7 Passengers, including driver |
|-------------|-----------------------------------|
| | 8-15 Passengers, including driver |

| MAKE | YEAR & MODEL | VIN# | EMPTY WEIGHT |
|------|-------------------------|-------------------|--------------|
| 2002 | Chrysler Town & Country | 2C4GP44372R663421 | 4003 LBS |
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INSURANCE QUOTE

This form MUST BE COMPLETED.

The insurance quote must be complete, listing current insurance premiums. At the discretion of the Commission, a copy of current insurance policies may be required. Do not provide a copy of insurance policies unless requested. You will not be required to purchase insurance until your application has been approved and an order has been issued by the PSC. THIS IS ONLY A QUOTE.

| The following insurance quote | is for: |
|-------------------------------------|--|
| | Jonathon Dick |
| | Name of Applicant |
| | 939 Anson Court Surfside Beach, SC 29575 |
| | Address of Applicant |
| Amount of Premium: | Limits Quoted: (See Below) |
| Liability Insurance \$ 3350 | Limits \$25,000/50,000/25,000 |
| The above quoted premium is | for a term of months. |
| Minimum Limits - Intrastate | Only: |
| 1-7 Passengers* 8-15 Passengers* | \$ 25,000/50,000/25,000 * Passengers = Number of seatbelts in the vehicle including the driver's seatbelt \$ 25,000/100,000/25,000 |
| | Gateway Insurance |
| | Name of Insurance Company |
| 4 | 300 East Ponce De Leone Clarkston, GA 30021 |
| · | Home Office Address of Company |

I, the Applicant, am familiar with the Commission's Rules and Regulations relating to insurance requirements and the above quote meets the minimum insurance limits prescribed. The insurance company making this quote is authorized by the South Carolina Department of Insurance to do business in South Carolina.

NOTICE:

If you wish to self-insure your motor vehicles for liability and property damage, you must comply with S.C. Code Ann. Sections 56-9-60 and 58-23-910. For more information, contact the Department of Motor Vehicles at (803) 896-8457 or (803) 896-9903.

If you wish to apply as a self-insured for worker's compensation coverage in South Carolina you may do so with the South Carolina Worker's Compensation Commission (WCC) provided that you will be able to: 1) post a surety bond or letter-of-credit with the WCC for a minimum of \$500,000, 2) agree to pay a yearly self-insurance tax, and 3) agree to pay an annual assessment to the South Carolina Second Injury Fund. For more information, contact the WCC Self-Insurance Division at (803) 737-5712 or on the web at www.wcc.state.sc.us/self-insurance.

Exhibit Fit, Willing, and Able (FWA)

| | | Jonathon Dick |
|----|--------------------------------------|---|
| | | Name of Applicant |
| | | |
| 1. | Are there currently any o | outstanding judgments against the Applicant? |
| | If Yes, list judgements h | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| 2. | | h all statutes and regulations, including safety regulations and governing for-hire motor th South Carolina, and does Applicant agree to operate in compliance with these |
| | Yes | ○ No |
| | | |
| 3. | Is Applicant aware of the therewith? | e Commission's insurance requirements and the insurance premium costs associated |
| | Yes | ○ No |

Exhibit on Driver Qualifications

| 1. | Applie | cant understands that a | all d | rivers must be a minimum of 18 years of age. |
|----|---------|---|-------|---|
| | • | Yes | 0 | No . |
| 2. | and su | | ΜV | tified copy of the driver's three (3) year driving record issued by the SC DMV of the state in which the driver is or has been domiciled for such period must business office. |
| | • | Yes | 0 | No |
| | | | | |
| 3. | | cant understands that a be maintained in the A | | minal history background check from the state where the driver currently lives cant's business office. |
| | • | Yes | 0 | No |
| 4. | their p | | ting | ivers operating a vehicle under a Class C Taxi Certificate must have in a charter vehicle, a valid driver's license issued by the SC DMV or the current |
| | • | Yes | 0 | No |
| | | | | |
| 5. | vehicl | es to drivers who are r | egis | lass C Taxi Certificate holders are prohibited from employing or leasing tered, or required to be registered, as sex offenders with the South Carolina or any national registry of sex offenders. |
| | • | Yes | 0 | No |

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA 101 EXECUTIVE CENTER DRIVE, SUITE 100 COLUMBIA, SOUTH CAROLINA 29210

Applicant is familiar with the provision of S.C. Code Ann. §58-23-10, et seq.(1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (S.C. Code Ann. Regs., 1976), and R.38-400 through R.38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Volume 2, S.C. Code Ann., 1976) and amendments thereto, and hereby promises compliance therewith.

S.C. Code Ann. Section 58-3-250 states, in part, that every final order of the Commission must be served by electronic service, registered or certified mail, upon the parties to the proceeding or their attorneys.

| PΙ | ease | checi | k t | he | app. | lica | bl | e | box | : |
|----|------|-------|-----|----|------|------|----|---|-----|---|
|----|------|-------|-----|----|------|------|----|---|-----|---|

The Applicant AGREES to receive future Commission orders related to the Applicant's authority in South Carolina through the Commission's eService System. The Applicant authorizes the Commission to serve its orders by using the email address as it appears on page one of this Application. To sign up for eService notifications, please visit www.psc.sc. gov to create a My DMS account.

The Applicant DOES NOT AGREE to receive future Commission orders related to the Applicant's authority in South Carolina through the Commission's eService System.

The Applicant for the Certificate of Public Convenience and Necessity as set forth in the foregoing, swear or affirm that all statements contained in the above application are true and correct.

Applicant's Signature

Owner

Title of Applicant (e.g. President, Owner, etc.)

STATE OF SOUTH CAROLINA

COUNTY OF Horry

SWORN TO BEFORE ME
This June 19 June